

**Instructions for Completing RMA Form**  
*The numbered sections correspond to instructions on the right.*

<b>Making Home Affordable Program</b> <b>Request For Modification and Affidavit (RMA)</b>		 <b>MAKING HOME AFFORDABLE.gov</b>																									
REQUEST FOR MODIFICATION AND AFFIDAVIT (RMA) page 1		COMPLETE ALL THREE PAGES OF THIS FORM																									
Loan I.D. Number <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">1</span>		Servicer <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">2</span>																									
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Lien Holder's Name/Servicer	Balance	Contact Number	Loan Number																								

**HARDSHIP AFFIDAVIT**

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I (We) am/are requesting review under the Making Home Affordable program.

I am having difficulty making my monthly payment because of financial difficulties created by (check all that apply):

<input type="checkbox"/> My household income has been reduced. For example: unemployment, underemployment, reduced pay or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.	<input type="checkbox"/> My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt.
<input type="checkbox"/> My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.	<input type="checkbox"/> My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.

☐ Other: \_\_\_\_\_

Explanation (continue on back of page 3 if necessary): \_\_\_\_\_  
\_\_\_\_\_

page 1 of 3

1. Your loan ID number can be found on your mortgage statement.
2. Your loan servicer is the financial institution that collects your monthly mortgage payments.
3. This section must include the borrower whose name appears on the mortgage.
4. The co-borrower is a second person on the mortgage. Do not include anyone in this section whose name does not appear on the mortgage.
5. For this section, you should only choose one response to each question.
6. Please provide both a mailing address and property address if different. The property address should correspond to the mortgage you are attempting to modify. If an email address is provided, it should belong to one of the borrowers listed on the mortgage.
7. If your property is not listed for sale, you do not need to fill out the rest of Section 7. Only include offers for sales that you received in the past year.
8. If you are interested in working with a housing counselor, HUD-approved counselors are available free-of-charge and can be located on the Making Home Affordable Program website at [www.MakingHomeAffordable.gov](http://www.MakingHomeAffordable.gov) by clicking on "Find a Counselor".
9. If your real estate taxes and property insurance are part of the monthly payment that you make to your servicer, select "lender does." HOA refers to a Homeowner's Association.
10. See instructions for Section 9.
11. The filing date indicates when you officially filed for bankruptcy. Only check the "yes" box for a discharged bankruptcy if you no longer owe any obligations.
12. Additional liens include second (or third) mortgages and home equity lines of credit.
13. Please select as many hardships that apply to your situation. You can use the extra lines to explain your hardship, although extensive responses could delay the processing of your application.

## Instructions for Completing RMA Form

*The numbered sections correspond to instructions on the right.*

REQUEST FOR MODIFICATION AND AFFIDAVIT (RMA) page 2

COMPLETE ALL THREE PAGES OF THIS FORM

### INCOME/EXPENSES FOR HOUSEHOLD<sup>1</sup>

Number of People in Household: **14**

Monthly Household Income		Monthly Household Expenses/Debt		Household Assets	
Monthly Gross Wages	\$ <b>15</b>	First Mortgage Payment	\$ <b>26</b>	Checking Account(s)	\$ <b>37</b>
Overtime	\$ <b>16</b>	Second Mortgage Payment	\$ <b>27</b>	Checking Account(s)	\$ <b>38</b>
Child Support / Alimony / Separation <sup>2</sup>	\$ <b>17</b>	Insurance	\$ <b>28</b>	Savings/ Money Market	\$ <b>39</b>
Social Security/SSDI	\$ <b>18</b>	Property Taxes	\$ <b>29</b>	CDs	\$ <b>40</b>
Other monthly income from pensions, annuities or retirement plans	\$ <b>19</b>	Credit Cards / Installment Loan(s) (total minimum payment per month)	\$ <b>30</b>	Stocks / Bonds	\$ <b>41</b>
Tips, commissions, bonus and self-employed income	\$ <b>20</b>	Alimony, child support payments	\$ <b>31</b>	Other Cash on Hand	\$ <b>42</b>
Rents Received	\$ <b>21</b>	Net Rental Expenses	\$ <b>32</b>	Other Real Estate (estimated value)	\$ <b>43</b>
Unemployment Income	\$ <b>22</b>	HOA/Condo Fees/Property Maintenance	\$ <b>33</b>	Other _____	\$ <b>44</b>
Food Stamps/Welfare	\$ <b>23</b>	Car Payments	\$ <b>34</b>	Other _____	\$ <b>45</b>
Other (investment income, royalties, interest, dividends etc.)	\$ <b>24</b>	Other _____	\$ <b>35</b>	Do not include the value of life insurance or retirement plans when calculating assets (401k, pension funds, annuities, IRAs, Keogh plans, etc.)	
<b>Total (Gross Income)</b>	<b>\$ 25</b>	<b>Total Debt/Expenses</b>	<b>\$ 36</b>	<b>Total Assets</b>	<b>\$ 46</b>

### INCOME MUST BE DOCUMENTED

<sup>1</sup>Include combined income and expenses from the borrower and co-borrower (if any). If you include income and expenses from a household member who is not a borrower, please specify using the back of this form if necessary.

<sup>2</sup>You are not required to disclose Child Support, Alimony or Separation Maintenance income, unless you choose to have it considered by your servicer.

### INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. **You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it.** If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. **If you do not wish to furnish the information, please check the box below.**

<b>BORROWER</b> <input type="checkbox"/> I do not wish to furnish this information <b>47</b>	<b>CO-BORROWER</b> <input type="checkbox"/> I do not wish to furnish this information								
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino								
<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White								
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<b>To be completed by interviewer</b>									
<b>This request was taken by:</b> <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">Name/Address of Interviewer's Employer</td> </tr> <tr> <td style="width: 60%;">Interviewer's Name (print or type) &amp; ID Number</td> <td></td> </tr> <tr> <td>Interviewer's Signature</td> <td>Date</td> </tr> <tr> <td colspan="2">Interviewer's Phone Number (include area code)</td> </tr> </table>	Name/Address of Interviewer's Employer		Interviewer's Name (print or type) & ID Number		Interviewer's Signature	Date	Interviewer's Phone Number (include area code)	
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Interviewer's Signature	Date								
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page 2 of 3

14. Indicate the number of people in your household who contribute to the total household income.
15. Monthly gross wages are what you receive before taxes. Use your most current pay stub to determine this amount.
16. Monthly overtime should be listed on a current pay stub.
17. If you receive child support, alimony, or separation maintenance income, you are not required to report it by law. You should only include this amount if you would like it to be included in the income calculation.
18. SSDI refers to Social Security Disability Income.
19. Only include this if you are retired and collecting income from retirement funds.
20. If applicable, this amount can be found on your pay stub.
21. Only include rental income if used as part of your overall income.
22. You must have at least nine months of unemployment income to report on this form. For more information about unemployment benefits, you may visit the Department of Labor's Unemployment Benefit Estimation Tool online at: [www.ows.doleta.gov/unemploy/ben\\_entitle.asp](http://www.ows.doleta.gov/unemploy/ben_entitle.asp).
23. Report the amount indicated on your benefits letter. You must provide a copy of this letter as documentation of this income.
24. Add all other income and report the total sum in this box.
25. Add all of the amounts in the income column (boxes 15-24) and report the sum.
26. This amount can be found on the statement for your first mortgage.
27. If applicable, this amount can be found on the statement for your second mortgage or home equity lines of credit.
28. This refers only to homeowner's insurance and should be reported only if you pay this yourself.
29. Only report these taxes if you pay them yourself.
30. Add all credit cards and installment payments and report the sum here.
31. If you are responsible for paying child support or alimony, you must report the amount here.
32. Report amount if your total rental income does not cover your total rental expenses.
33. HOA refers to a Homeowner's Association; report this only if you pay these fees yourself.
34. Include car payments only if you are the owner of the vehicle.
35. Include any other pertinent household expenses.
36. Add all amounts in expense column (boxes 26-35) and report the sum.
- 37-39. Report amounts for all accounts, if applicable.
40. CDs are certificates of deposit.
- 41-42. Report amounts for all accounts, if applicable.
43. Include estimated value for all other properties owned.
- 44-45. Report any other assets other than the value of life insurance or retirement plans, including 401K, pension funds, IRAs, Keogh plans, etc.

Instructions for Completing RMA Form  
The numbered sections correspond to instructions on the right.

REQUEST FOR MODIFICATION AND AFFIDAVIT (RMA) page 3

COMPLETE ALL THREE PAGES OF THIS FORM

**ACKNOWLEDGEMENT AND AGREEMENT**

*In making this request for consideration under the Making Home Affordable Program, I certify under penalty of perjury:*

1. That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
2. I understand that the Servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements, may require me to provide supporting documentation. I also understand that knowingly submitting false information may violate Federal law.
3. I understand the Servicer will pull a current credit report on all borrowers obligated on the Note.
4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the Servicer may cancel any Agreement under Making Home Affordable and may pursue foreclosure on my home.
5. That: my property is owner-occupied; I intend to reside in this property for the next twelve months; I have not received a condemnation notice; and there has been no change in the ownership of the Property since I signed the documents for the mortgage that I want to modify.
6. I am willing to provide all requested documents and to respond to all Servicer questions in a timely manner.
7. I understand that the Servicer will use the information in this document to evaluate my eligibility for a loan modification or short sale or deed-in-lieu of foreclosure, but the Servicer is not obligated to offer me assistance based solely on the statements in this document.
8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
9. I understand that the Servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any Making Home Affordable Agreement by Servicer to (a) the U.S. Department of the Treasury, (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan; (c) any investor, insurer, guarantor or servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s); (d) companies that perform support services in conjunction with Making Home Affordable; and (e) any HUD-certified housing counselor.

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Borrower Signature

Date

Co-Borrower Signature

Date

**HOMEOWNER'S HOTLINE**

*If you have questions about this document or the modification process, please call your servicer.*

*If you have questions about the program that your servicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 1-888-995-HOPE (4673). The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.*

**888-995-HOPE™**  
Homeowner's HOPE™ Hotline

**NOTICE TO BORROWERS**

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy in your home, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to Lender in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or [www.sigtar.gov](http://www.sigtar.gov). Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220.



48. Please be sure to read the entire agreement before signing. Do not leave off a signature as this will increase the time it takes to process your application.